



PEIRES LAW_{LLP}

Matrimonial Intake Form

Date of Scheduled Appointment:	
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CLIENT INFORMATION	
Name (full legal name):	
Address:	<i>Since:</i>
Phone No. (Home):	
Phone No. (Cellphone):	
Phone No. (Business):	
Email Address:	
Date of Birth:	
Birthplace:	
Citizenship:	
Occupation/Position:	
Employer and Address:	
Length of Employment:	
Annual gross income:	

Social Insurance Number:	
Pension Plan(s):	
Surname at Birth:	
Surname before Marriage: <i>(if applicable)</i>	
Divorced Before:	Yes <input type="checkbox"/> No <input type="checkbox"/> <i>Place and Date:</i>

OPPOSING SIDE

Husband Wife Common Law Parent of child of Relationship

Name (full legal name):	
Address:	<i>Since:</i>
Date of Birth:	
Birthplace:	
Citizenship:	
Occupation/Position:	
Employer and Address:	
Length of Employment:	
Annual Gross Income:	
Social Insurance Number:	
Pension Plan(s):	
Surname at Birth:	
Surname before Marriage: <i>(if applicable)</i>	
Divorced Before:	Yes <input type="checkbox"/> No <input type="checkbox"/> <i>Place and Date:</i>

MARRIAGE & SEPARATION DETAILS (if applicable)	
Date of marriage:	
Location:	
Cohabitation Before Marriage:	Yes <input type="checkbox"/> No <input type="checkbox"/> Since:
Date of Separation:	
Current Living Arrangement:	Living in same home <input type="checkbox"/> Living separate and apart <input type="checkbox"/>

CHILD NO. 1	
Name:	
Date of Birth:	
School/Grade:	
Current Residence:	
Current Access Arrangement:	
Custody Arrangement Sought:	Joint <input type="checkbox"/> Sole <input type="checkbox"/>

CHILD NO. 2	
Name:	
Date of Birth:	
School/Grade:	
Current Residence:	
Current Access Arrangement:	
Custody Arrangement Sought:	Joint <input type="checkbox"/> Sole <input type="checkbox"/>

OTHER INFORMATION	
Previous Court Actions:	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes details:
Domestic Contract:	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes details:

ISSUES	
Your Concerns Relate To:	<input type="checkbox"/> Divorce <input type="checkbox"/> Access <input type="checkbox"/> Separation Agreement <input type="checkbox"/> Marriage Contract <input type="checkbox"/> Cohabitation Agreement <input type="checkbox"/> Division of Property <input type="checkbox"/> Child Support <input type="checkbox"/> Custody <input type="checkbox"/> Spousal Support